Case 2:15-bk-53230 Doc 1 Filed 05/15/15 Entered 05/15/15 17:38:46 Desc Main B1 (Official Form 1) (04/13) Document Page 1 of 75

United States Bankruptcy Co Southern District of Ohio							Volu	untary Petition
Name of Debtor (if individual, enter Last, First, Mid- Davis, Charles Robert	Name of Debtor (if individual, enter Last, First, Middle):  Davis, Charles Robert			Name of Joint Debtor (Spouse) (Last, First, Middle):  Davis, Taylor Lindsey				
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):				arried, m	aiden, a	e Joint Debtor i nd trade names)		years
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) /Complete EIN (if more than one, state all): 4026			I	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) /Complete EIN (if more than one, state all): 3346				
Street Address of Debtor (No. & Street, City, State & Zip Code):  1984 Queens Meadow Lane			1984 Que	Street Address of Joint Debtor (No. & Street, City, State & Zip Code):  1984 Queens Meadow Lane Grove City, OH				
Grove City, OH  ZIPCODE 43213-1263			ZIPCODE <b>43213-1263</b>				ZIPCODE <b>43213-1263</b>	
County of Residence or of the Principal Place of Business:  Franklin				County of Residence or of the Principal Place of Business:  Franklin				
Mailing Address of Debtor (if different from street a	Mailing Address of Debtor (if different from street address)			ddress of	Joint De	ebtor (if differer	nt from stree	et address):
	ZIPCODE			ZIPCODE				ZIPCODE
Location of Principal Assets of Business Debtor (if	lifferent from	street address	above):				•	
							2	ZIPCODE
Type of Debtor (Form of Organization) (Check one box.)		(Check	f Business one box.)			the Petitio	n is Filed (	Code Under Which Check one box.)
Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)  Chapter 15 Debtor Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:  Filing Fee (Check one box)  Filing Fee to be paid in installments (Applicable to only). Must attach signed application for the court consideration certifying that the debtor is unable to except in installments. Rule 1006(b). See Official	Single   U.S.C.   Railroa   Stockb   Comm   Clearin   Other   Debtor   Title 2   Internation individuals   So pay fee	S 101(51B) ad broker lodity Br	mpt Entity if applicable.) applicable.) applicable. ap	Chapter 9 Chapter 11 Chapter 12 Chapter 13 Chapter 13 Chapter 13 Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding  Nature of Debts (Check one box.)  Debts are primarily consumer debts, defined in 11 U.S.C. business debte \$101(8) as "incurred by an individual primarily for a			a Proceeding oter 15 Petition for ognition of a Foreign main Proceeding  Debts box.)  Debts are primarily business debts.	
☐ Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.  Check all applicable boxes: ☐ A plan is being filed with this petition ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, if accordance with 11 U.S.C. § 1126(b).								
Statistical/Administrative Information  Debtor estimates that funds will be available for distribution to unsecured creditor.  Debtor estimates that, after any exempt property is excluded and administrative distribution to unsecured creditors.				id, there	will be n	o funds availab	le for	THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors		] 001- 0,000	10,001- 25,000	25,001- 50,000		50,001- 100,000	Over 100,000	
			\$50,000,001 to \$100 million	\$100,00 to \$500		\$500,000,001 to \$1 billion	More than \$1 billion	
Estimated Liabilities			\$50,000,001 to \$100 million			\$500,000,001	More than	

B1 (Official Form 1) (04/13) Document	Page 2 of 75	5/15 17:38:46 Desc Main
Voluntary Petition (This page must be completed and filed in every case)	Name of Debtor(s):  Davis, Charles Robe	rt & Davis, Taylor Lindsey
All Prior Bankruptcy Case Filed Within Last	t 8 Years (If more than ty	wo, attach additional sheet)
Location Where Filed: <b>None</b>	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or	Affiliate of this Debto	r (If more than one, attach additional sheet)
Name of Debtor: None	Case Number:	Date Filed:
District:	Relationship:	Judge:
Exhibit A  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  Exhibit A is attached and made a part of this petition.	whose deb I, the attorney for the pet that I have informed the chapter 7, 11, 12, or 1 explained the relief avai	Exhibit B  Impleted if debtor is an individual of the primarily consumer debts.)  It it increases the petitioner named in the foregoing petition, declare the petitioner that [he or she] may proceed under 13 of title 11, United States Code, and have lable under each such chapter. I further certify the btor the notice required by 11 U.S.C. § 342(b).
	X /s/ Mark Albert Ho Signature of Attorney for I	
or safety?  ☐ Yes, and Exhibit C is attached and made a part of this petition.  ▼ No		
Exhi  (To be completed by every individual debtor. If a joint petition is filed, ex  Exhibit D completed and signed by the debtor is attached and ma		and attach a separate Exhibit D.)
If this is a joint petition:  Exhibit D also completed and signed by the joint debtor is attached.	ed a made a part of this pe	tition.
	days than in any other Di partner, or partnership pen lace of business or principa	strict. ding in this District. al assets in the United States in this District,
in this District, or the interests of the parties will be served in reg		
Certification by a Debtor Who Reside  (Check all app  ☐ Landlord has a judgment against the debtor for possession of deb	olicable boxes.)	
(Nama of landlard the	at obtained judgment)	
(Name of fandiord the		
	of landlord)	
	e circumstances under which	

 $\square$  Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Voluntary Petition

# chapter 7.

Name of Debtor(s):

Davis, Charles Robert & Davis, Taylor Lindsey

#### Signatures

#### Signature(s) of Debtor(s) (Individual/Joint)

(This page must be completed and filed in every case)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

#### X /s/ Charles Robert Davis

Signature of Debtor

Charles Robert Davis

X /s/ Taylor Lindsey Davis

Signature of Joint Debtor

**Taylor Lindsey Davis** 

(614) 307-8566

Telephone Number (If not represented by attorney)

May 15, 2015

#### Signature of Attorney\*

#### X /s/ Mark Albert Herder

Signature of Attorney for Debtor(s)

Mark Albert Herder 0061503 Mark Albert Herder 901 South High Street Columbus, OH 43205-0000

#### May 15, 2015

Date

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

ne of Authorized	l Individual			
n	me of Authorized	me of Authorized Individual	me of Authorized Individual	me of Authorized Individual

#### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.
- Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

		n Kepreseman	ignature of For
ed Name of Foreign Representative	tative	reign Represe	rinted Name of

#### **Signature of Non-Attorney Petition Preparer**

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address		

X				
	Signature			

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

<sup>\*</sup>In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

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Case 2:15-bk-53230 B1D (Official Form 1, Exhibit D) (12/09)

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**United States Bankruptcy Court Southern District of Ohio** 

IN RE:	Case No
Davis, Charles Robert	Chapter 13
Debtor(s)	
EXHIBIT D - INDIVIDUAL DEBI	TOR'S STATEMENT OF COMPLIANCE
CREDIT COUNS	ELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose

whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.
Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.
1. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
2. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
□ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]
If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.
4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]  [Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable
of realizing and making rational decisions with respect to financial responsibilities.);  Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to
participate in a credit counseling briefing in person, by telephone, or through the Internet.);  Active military duty in a military combat zone.
5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Charles Robert Davis	
Date: May 15, 2015	

From: Academy of Financial Fax: (877) 833-2867

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Certificate Number: 11557-OHS-CC-025543491

11557-OHS-CC-025543401

### **CERTIFICATE OF COUNSELING**

I CERTIFY that on May 14, 2015, at 9:55 o'clock AM MDT, Charles R. Davis received from Academy of Financial Literacy, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Southern District of Ohio, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: May 14, 2015

By: /s/Phillip Eugene Day

Name: Phillip Eugene Day

Title: Owner

<sup>\*</sup> Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

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Case 2:15-bk-53230 Doc 1 Filed 05/15/15 Entered 05/15/15 17:38:46 Desc Main Document Page 6 of 75 B1D (Official Form 1, Exhibit D) (12/09)

**United States Bankruptcy Court** Southern District of Ohio

Southern District	or Onio
IN RE:	Case No
Davis, Taylor Lindsey	Chapter <b>13</b>
Debtor(s)	
EXHIBIT D - INDIVIDUAL DEBTOR'S ST CREDIT COUNSELING R	
Warning: You must be able to check truthfully one of the five statemed oso, you are not eligible to file a bankruptcy case, and the court can whatever filing fee you paid, and your creditors will be able to resume and you file another bankruptcy case later, you may be required to pato stop creditors' collection activities.	dismiss any case you do file. If that happens, you will lose e collection activities against you. If your case is dismissed
Every individual debtor must file this Exhibit D. If a joint petition is filed, earne of the five statements below and attach any documents as directed.	ach spouse must complete and file a separate Exhibit D. Check
1. Within the 180 days <b>before the filing of my bankruptcy case</b> , I recthe United States trustee or bankruptcy administrator that outlined the opperforming a related budget analysis, and I have a certificate from the agency certificate and a copy of any debt repayment plan developed through the	portunities for available credit counseling and assisted me in cy describing the services provided to me. Attach a copy of the
2. Within the 180 days <b>before the filing of my bankruptcy case</b> , I recthe United States trustee or bankruptcy administrator that outlined the opperforming a related budget analysis, but I do not have a certificate from the a copy of a certificate from the agency describing the services provided to y the agency no later than 14 days after your bankruptcy case is filed.	portunities for available credit counseling and assisted me in e agency describing the services provided to me. <i>You must file</i>
3. I certify that I requested credit counseling services from an approved days from the time I made my request, and the following exigent circum requirement so I can file my bankruptcy case now. [Summarize exigent circum]	mstances merit a temporary waiver of the credit counseling

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing

counseing offering.
4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
Active military duty in a military combat zone.
5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.

I ce

Signature of Debtor: /s/ Taylor Lindsey Davis	

Date: May 15, 2015

From: Academy of Financial Fax: (877) 833-2867 Filed 05/15/15 Fax: +1 (614) 444-4446 Page 2 of 2 05/14/2015 9:25 AM ain Case 2:15-bk-53230 Doc 1

Document

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Certificate Number: 11557-OHS-CC-025543504

### **CERTIFICATE OF COUNSELING**

I CERTIFY that on May 14, 2015, at 10:22 o'clock AM MDT, Taylor L. Davis received from Academy of Financial Literacy, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Southern District of Ohio, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: May 14, 2015 By: /s/Phillip Eugene Day Name: Phillip Eugene Day

Title:

Owner

\* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

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#### Case 2:15-bk-53230 Doc 1 Filed 05/15/15 Entered 05/15/15 17:38:46 Desc Main Document Page 8 of 75 **United States Bankruptcy Court**

**Southern District of Ohio** 

IN RE:	Case No
Davis, Charles Robert & Davis, Taylor Lindsey	Chapter 13
Debtor(s)	•

	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR AND APPLICATION FOR ALLOWANCE OF FEES IN CHAPTER 13 CASE
I.	Disclosure
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
	For legal services, I have agreed to accept
	Prior to the filing of this statement I have received
	Balance Due
2.	The source of the compensation paid to me was:  Debtor  Other (specify):
3.	The source of compensation to be paid to me is:  Debtor  Other (specify):
4.	I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

#### II. Application

- 5. I hereby apply for an allowance of fees in the amount set forth above. I understand and agree that the Court may approve, without itemization, an allowance of fees not to exceed \$3,500, for rendering the legal services set forth below. If I seek payment of fees in excess of \$3,500, I will file a separate application that sets forth the total amount of the fee requested, and that includes an itemization of all legal services performed, the hourly rate at which the services were performed, and the actual time spent by the case attorney, any other attorney, paralegal or professional person for whom fees are sought. Any request for reimbursement of expenses shall include an itemization of the expenses.
  - a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether, and under what chapter, to file a petition in bankruptcy;
  - Preparation and filing of any petition, schedules, statements of affairs and amendments thereto that may be required;
  - c. Preparation and filing of chapter 13 plan, and any pre-confirmation amendments thereto that may be required;
  - d. Preparation and filing of payroll orders and amended payroll orders;
  - Representation of the debtor at the meeting of creditors and confirmation hearing; and any continued hearings thereof; e.
  - Filing of address changes; f.
  - Routine phone calls and questions; g.
  - Review of claims; h.
  - Review of notice of intention to pay claims;
  - Preparation and filing of objections to non-real estate and non-tax claims; į.
  - Preparation and filing of first motion to suspend or reduce payments;
  - Preparation and filing of debtor's certification regarding issuance of discharge order; and
  - m. Any other duty as required by local decision or policy.

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6. By agreement with the debtor(s), the above disclosed fee does not include the following services:

May 15, 2015

Date

/s/ Mark Albert Herder

Mark Albert Herder 0061503 Mark Albert Herder 901 South High Street Columbus, OH 43205-0000 Case 2:15-bk-53230  $_{B201B \ (Form \ 201B) \ (12/09)}$ 

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United States Bankruptcy Court
Southern District of Ohio

IN RE:	Case No	
Davis, Charles Robert & Davis, Taylor Lindsey	Chapter 13	
	TICE TO CONSUMER DEBTOR(S) THE BANKRUPTCY CODE	
Certificate of [Non-Attor	ney] Bankruptcy Petition Preparer	
I, the [non-attorney] bankruptcy petition preparer signing the onotice, as required by § 342(b) of the Bankruptcy Code.	debtor's petition, hereby certify that I delive	red to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Prepare Address:	petition prepa the Social Sec principal, resp the bankruptc	y number (If the bankruptcy rer is not an individual, state curity number of the officer, consible person, or partner of y petition preparer.)  11 U.S.C. § 110.)
X		ŭ ,
Certific	eate of the Debtor	
I (We), the debtor(s), affirm that I (we) have received and read	d the attached notice, as required by § 342(b	) of the Bankruptcy Code.
Davis, Charles Robert & Davis, Taylor Lindsey	X /s/ Charles Robert Davis	5/15/2015
Printed Name(s) of Debtor(s)	Signature of Debtor	Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

X /s/ Taylor Lindsey Davis

Signature of Joint Debtor (if any)

5/15/2015

Date

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Case No. (if known) \_\_\_

#### UNITED STATES BANKRUPTCY COURT

# NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your

discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### **Chapter 11:** Reorganization (\$1167 filing fee, \$550 administrative fee: Total fee \$1717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

Fill in this information to identify your case:							
Debtor 1 Charles Robert First Name	Davis Middle Name	Last Name					
Debtor 2 Taylor Lindsey (Spouse, if filing) First Name	/ Davis Middle Name	Last Name					
United States Bankruptcy Court for t	he: Southern District	of Ohio					
Case number(# known)							

☐ Check if this is an amended filing

#### Official Form 22C-1

# Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1:

Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
  - Not married. Fill out Column A, lines 2-11.

Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	from that property in one column only. If you have nothing	to report for	any line, v	vrite \$01n	tne sp	oace.			
						umn A or 1	Column E Debtor 2 o non-filing	or	
2.	Your gross wages, salary, tips, bonuses, overtime, and payroll deductions).	com missi	ons (before	e all	\$	6,772.13	\$ <u>    2,</u> 8	853.07	
3.	<b>Alimony and maintenance payments.</b> Do not include pay Column B is filled in.	\$	0.00	\$	0.00				
4.	All amounts from any source which are regularly paid f you or your dependents, including child support. Include an unmarried partner, members of your household, your de roommates. Include regular contributions from a spouse or in. Do not include payments you listed on line 3.	\$	0.00	\$	0.00				
5.	Net income from operating a business, profession, or f	arm							
	Gross receipts (before all deductions)	\$	0.00						
	Ordinary and necessary operating expenses	<b>-</b> \$	0.00						
	Net monthly income from a business, profession, or farm	\$	0.00	Copy here	\$	0.00	\$	0.00	
6.	Net income from rental and other real property								
	Gross receipts (before all deductions)	\$	0.00						
	Ordinary and necessary operating expenses	- \$	0.00						
	Net monthly income from rental or other real property	\$	0.00	Copy here	\$	0.00	\$	0.00	

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Case number (if known)

Dobto	\r 1	

**Charles Robert Davis** 

	First Name Middle Nam e Last Name					
		Column / Debtor 1	A	Column Debtor 2 n on-filing	or	
7.	Interest, dividends, and royalties	\$	0.00	\$	0.00	
8.	Unemployment compensation	\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount received was a benefit unde the Social Security Act. Instead, list it here:	r				
	For you\$\$					
	For your spouse\$\$					
9.	<b>Pension or retirement income.</b> Do not include any amount received that was a benefit under the Social Security Act.	\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c.					
	10a	\$		\$		
	10b	\$		\$		
	10c. Total amounts from separate pages, if any.	I (*)			0.00	
	loc. Total amounts from separate pages, if any.	+ \$	0.00	+ \$	0.00	
11.	<b>Calculate your total average monthly income.</b> Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$6	5,772.13	+ \$_2,	853.07	= \$9,625.20
						Total average monthly income
	Determine How to Measure Your Deductions from Income  Copy your total average monthly income from line 11.					\$9,625.20
12.						\$9,625.20
12.	Copy your total average monthly income from line 11.					\$9,625.20
12.	Copy your total average monthly income from line 11  Calculate the marital adjustment. Check one:					\$ <u>9,625.20</u>
12.	Copy your total average monthly income from line 11.  Calculate the marital adjustment. Check one:  You are not married. Fill in 0 in line 13d.	rly paid for th	he househol	d expenses	of you	\$9,625.20
12.	Copy your total average monthly income from line 11.  Calculate the marital adjustment. Check one:  You are not married. Fill in 0 in line 13d.  You are married and your spouse is filing with you. Fill in 0 in line 13d.  You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was NOT regula or your dependents, such as payment of the spouse's tax liability or the spouse's	rly paid for th s support of s	he househol someone ot	d expenses her than you	of you	\$9,625.20
12.	Calculate the marital adjustment. Check one:  You are not married. Fill in 0 in line 13d.  You are married and your spouse is filing with you. Fill in 0 in line 13d.  You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was NOT regula or your dependents, such as payment of the spouse's tax liability or the spouse's your dependents.  In lines 13a-c, specify the basis for excluding this income and the amount of income	rly paid for th s support of s	he househol someone ot	d expenses her than you	of you	\$9,625.20
12.	Calculate the marital adjustment. Check one:  You are not married. Fill in 0 in line 13d.  You are married and your spouse is filing with you. Fill in 0 in line 13d.  You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was NOT regula or your dependents, such as payment of the spouse's tax liability or the spouse's your dependents.  In lines 13a-c, specify the basis for excluding this income and the amount of income necessary, list additional adjustments on a separate page.	rly paid for the support of some devoted	he househol someone ot	d expenses her than you	of you	\$9,625.20
12.	Calculate the marital adjustment. Check one:  You are not married. Fill in 0 in line 13d.  You are married and your spouse is filing with you. Fill in 0 in line 13d.  You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was NOT regula or your dependents, such as payment of the spouse's tax liability or the spouse's your dependents.  In lines 13a-c, specify the basis for excluding this income and the amount of inconecessary, list additional adjustments on a separate page.  If this adjustment does not apply, enter 0 on line 13d.	rly paid for the support of suppo	he househol someone ot	d expenses her than you	of you	\$9,625.20
12.	Calculate the marital adjustment. Check one:  You are not married. Fill in 0 in line 13d.  You are married and your spouse is filing with you. Fill in 0 in line 13d.  You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was NOT regula or your dependents, such as payment of the spouse's tax liability or the spouse's your dependents.  In lines 13a-c, specify the basis for excluding this income and the amount of inconecessary, list additional adjustments on a separate page.  If this adjustment does not apply, enter 0 on line 13d.	rly paid for the support of suppo	he househol someone ot	d expenses her than you	of you	\$9,625.20
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12.	Calculate the marital adjustment. Check one:  You are not married. Fill in 0 in line 13d.  You are married and your spouse is filing with you. Fill in 0 in line 13d.  You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was NOT regula or your dependents, such as payment of the spouse's tax liability or the spouse's your dependents.  In lines 13a-c, specify the basis for excluding this income and the amount of inconecessary, list additional adjustments on a separate page.  If this adjustment does not apply, enter 0 on line 13d.  13a.  13b.  13c.	rly paid for the support of suppo	he househol someone ot to each pur	d expenses her than you pose. If	of you or	
12.	Calculate the marital adjustment. Check one:  You are not married. Fill in 0 in line 13d.  You are married and your spouse is filing with you. Fill in 0 in line 13d.  You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was NOT regula or your dependents, such as payment of the spouse's tax liability or the spouse's your dependents.  In lines 13a-c, specify the basis for excluding this income and the amount of inconecessary, list additional adjustments on a separate page.  If this adjustment does not apply, enter 0 on line 13d.  13a.  13b.  13c.  13d. Total	urly paid for the support of supp	he householsomeone ot to each pur	d expenses her than you pose. If	of you or 13d.	—
12.	Calculate the marital adjustment. Check one:  You are not married. Fill in 0 in line 13d.  You are married and your spouse is filing with you. Fill in 0 in line 13d.  You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was NOT regula or your dependents, such as payment of the spouse's tax liability or the spouse's your dependents.  In lines 13a-c, specify the basis for excluding this income and the amount of inconecessary, list additional adjustments on a separate page.  If this adjustment does not apply, enter 0 on line 13d.  13a.  13b.  13c.  13d. Total	urly paid for the support of supp	he householsomeone ot to each pur	d expenses her than you pose. If	of you or 13d.	<b>—</b> 0.00
12.	Calculate the marital adjustment. Check one:  You are not married. Fill in 0 in line 13d.  You are married and your spouse is filing with you. Fill in 0 in line 13d.  You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was NOT regula or your dependents, such as payment of the spouse's tax liability or the spouse's your dependents.  In lines 13a-c, specify the basis for excluding this income and the amount of inconecessary, list additional adjustments on a separate page.  If this adjustment does not apply, enter 0 on line 13d.  13a.  13b.  13c.  13d. Total	urly paid for the support of supp	he householsomeone ot to each pur	d expenses her than you pose. If	of you or 13d.	—

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Case number (if known)

Debtor 1

Charles Robert Davis
First Name Middle Name

Last Name

16.	Calculat	e the median family income that applies to y	ou. Follow these s	steps:		
	16a. Fill	in the state in which you live.	Ohio			
	16b. Fill	in the number of people in your household.	_8			
	То	in the median family income for your state and find a list of applicable median income amounts tructions for this form. This list may also be avai	s, go online using t	he link specified in the separate	16c.	\$ <u>111,022.00</u>
17.	How do	the lines compare?				
	17a. 🗖	Line 15b is less than or equal to line 16c. On the $\S$ 1325(b)(3). <b>Go to Part 3.</b> Do NOT fill out $Ca$			not deter	mined under 11 U.S.C.
	17b. <b>1</b>	Line 15b is more than line 16c. On the top of p § 1325(b)(3). <b>Go to Part 3 and fill out Calcula</b> your current monthly income from line 14 above	ation of Disposal	check box 2, Disposable income is determined ble Income (Official Form 22C-2). On line 39 of the Income (Official Form 22C-2).		
Pa	art 3:	Calculate Your Commitment Period	Under 11 U.S.C	. §1325(b)(4)		
		ur total average monthly income from line 1			18.	\$ <u>9,625.20</u>
19.	that calc income,	ulating the commitment period under 11 U.S.C. copy the amount from line 13d.	§ 1325(b)(4) allow			<b>-</b> \$ 0.00
		rital adjustment does not apply, fill in 0 on line 1	19a.		19a.	
	Subtrac	t line 19a from line 18.			19b.	\$ 9,625.20
20.	Calculat	e your current monthly income for the year.	Follow these step	S:		
	20a. Co	py line 19b			20a.	\$ <u>9,625.20</u>
	Mu	Itiply by 12 (the number of months in a year).				<b>x</b> 12
	20b. The	e result is your current monthly income for the y	ear for this part of	the form.	20b.	\$ <u>115,502.40</u>
	20c. Cop	y the median family income for your state and s	ize of household f	rom line 16c		\$ <u>111,022.00</u>
21.	How do	the lines compare?				
	3 ye	20b is less than line 20c. Unless otherwise orders. Go to Part 4.			The com	mitment period is
		20b is more than or equal to line 20c. Unless of box 4, <i>The commitment period is 5 years</i> . Go		y the court, on the top of page 1 of this form,		
Р	art 4:	Sign Below				
	By sig	ning here, under penalty of perjury I declare tha	at the information o	on this statement and in any attachments is true	and cor	rect.
		Charles Robert Davis gnature of Debtor 1		/s/ Taylor Lindsey Davis Signature of Debtor 2		
	Da	te <b>May 15, 2015</b> MM / DD / YYYY		Date May 15, 2015 MM / DD / YYYY		
	If you	checked 17a, do NOT fill out or file Form 22C-2	2.			
	If you	checked 17b, fill out Form 22C-2 and file it with	this form. On line	39 of that form, copy your current monthly inco	ome from	line 14 above.

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Fill in this information to identify your case:							
Debtor 1	Charles Rob						
	First Name	Midde Name	Last Name				
Debtor 2	Taylor Linds		L and Norman				
(Spouse, if filing	) First Name	Midde Name	Last Name				
United States	Bankruptcy Court	for the: Southern District	of Ohio				
Case number							
(If known)							

#### Official Form 22C-2

#### Chapter 13 Calculation of Your Disposable Income

12/14

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 22C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 22C–1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 22C–1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

8

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$<u>3,025.00</u>

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

	Cha First Na	arles Robert L ame Middle Na	Davis	Last Name	Docu	ıment 	- Рас 	ge 17 of c	75 Case numbe	「 (if known)		
	People v	who are under	65 years	of age								
	7a Out-	of-pocket health	n care allo	wance ner	nercon	\$	60.00					
		ber of people v		·	person	x 8						
		total. Multiply lir				\$	480.00	Copy ling		480.00		
	Poonlo	who are 65 ye	ore of one	o or older				7C Here				
			_									
		of-pocket health		•	person	-	144.00					
	7e. Num	nber of people w	ho are 65	or older		X0	-	¬				
	7f. Sub	total. Multiply lin	ne 7d by li	ne 7e.		\$	0.00	Copylin 7fhere		0.00		
7g.	Total. A	dd lines 7c and	7f	············					\$	480.00	Copy total here 7g.	\$ <u>480.00</u>
_ocal	arde	You must use	the IRS L	ocal Standa	ards to a	answer the	e questior	ns in lines 8-	15.			
■ Ho	using and	d utilities – Ins d utilities – Mo	rtgage or	rent expe	nses							
■ Housion Housing Housing Housing Housing Housing Housing Housing	using and swer the fied in the using and		rtgage or nes 8-9, u ructions t urance ar	rent expenses the U.S for this form	nses 6. Truste m. This ng expe	ee Progra chart ma	ny also be ng the nu	e available a	t the ban	kruptcy cle	erk's office.	\$ <u>.6</u> 17.00
House House House the	using and swer the fied in the using and e dollar an	d utilities – Mo questions in li e separate inst d utilities – Ins nount listed for y	rtgage or nes 8-9, u ructions t urance ar your coun	rent expenses the U.S for this for this for this for this for insurance to the control of the co	nses  5. Truste m. This ng expe	ee Progra chart ma	ny also be ng the nu	e available a	t the ban	kruptcy cle	erk's office.	\$ <u>6</u> 17.00
o anspecif	using and swer the fied in the using and dollar and using and 9a. Using	d utilities – Mo questions in li e separate inst d utilities – Ins nount listed for y d utilities – Mo g the number of	rtgage or nes 8-9, u ructions f urance ar your coun rtgage or people yo	rent expenses the U.S for this form the operation of the control o	nses  5. Truste m. This ng expe ance and nses: in line 5	ee Progra chart ma nses: Usi d operating	ng the nu g expense	e available a mber of peoles.	<b>t the ban</b> ple you er	kruptcy cle	erk's office.	\$ <u>617.00</u>
■ Hours To ans specif . Hou the	swer the fied in the using and edollar an using and ga. Using lister 9b. Total	d utilities – Mo questions in li e separate inst d utilities – Ins nount listed for y d utilities – Mo	rtgage or nes 8-9, u ructions in urance ar your coun rtgage or people your	rent expenses the U.S. for this form operating the control of the	inses  5. Truste m. This ng expe ance and nses: in line 5 tit expenses	ee Progra chart ma nses: Usi d operating , fill in the ses.	ng the nu g expense dolar am	e available a imber of peo es.	<b>t the ban</b> ple you er	kruptcy cle	erk's office.	\$ <u>617.00</u>
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o ans pecif Hou	swer the fied in the distingtion of the distingtion of the distingtion of the distinction	questions in lies esparate instemental dutilities – Instemental listed for your dutilities – Moog the number of dor your count average month home.  I average month home.  I alculate the total ractually due to kruptcy. Next div	rtgage or nes 8-9, u ructions i urance ar your coun rtgage or people yo y for mort nly paymer al average each sec yide by 60	rent expenses the U.S for this form of operating the trent expenses ou entered agage or rent for all modern monthly particularly partic	in ses  6. Truste m. This mg expe ance and nses: in line 5 it expensiontgages ayment, or in the	chart machanters: Usid operation, fill in the ses. and other add all an 60 month:  Average in payment	ng the nu g expense dollar am r debts se mounts the s after yo	e available a imber of peopes. ount ecured by	<b>t the ban</b> ple you er	kruptcy cle	erk's office.	
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Explain why:

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Debtor 1	Charles	Robert Dav	ie	Document	Page 18 c	of 75 Case number (if known)		
Debtor 1	First Name	Middle Nam e	Last Name			Case Harriser (# known)		
11. Local	transporta	tion expenses	: Check the num	ber of vehicles for w	nich you claim a	n ownership or opera	ating expense.	
	0. Go to	line 14.						
	1. Go to							
042	2 or more	e. Go to line 12	<u>/</u>					
				al Standards and the or your Census region			im the operating	\$ <u>424.00</u>
				e IRS Local Standard you do not make any				
			nore than two ve		·	•	.,	
Ve	ehicle 1	Describe Vehicle 1:	2014 Chevro	let Equinox				
13	a. Ownersl	hip or leasing o	costs using IRS L	.ocal Standard	13a.	\$ <u>517.00</u>		
13	•		ent for all debts or leased vehicles	secured by Vehicle 1				
	add all a	mounts that ar in the 60 mont	e contractually d	ent here and on line lue to each secured or bankruptcy. Then	13e,			
	Name of ea	ch creditor for	ehicle 1	Average monthly payment				
	Telhio Cr	edit Union		\$566.67	Copy13b here	<b>-</b> \$566.67	Repeat this amount on line 33b.	
					Here 2		on line 33b.	
13			p or lease exper line 13a. If this n	nse umberis less than \$0	), enter \$0. 13c.	\$0.00	Copy net Vehicle 1 expense here	\$ <u>0.00</u>
Ve	ehicle 2	Describe Vehicle 2:	2013 Hyunda	ni Accent				
13	3d. Ownersh	nip or leasing c	osts using IRS L	ocal Standard	13d.	\$517.00		
13	•		ent for all debts or leased vehicles	secured by Vehicle 2 s.				
	Name of ea	ch creditor for \	/ehicle 2	Average monthly payment				
	GM Finan	cial		\$ 166.67	Copyhere 🗲	<b>—</b> \$166.67	Repeat this amount on line 33c.	
13			p or lease exper 13d. If this numb	nse er is less than \$0, en	ter \$0. 13f.	\$ <u>350.33</u>	Cop y net Vehicle 2 expense here	\$ <u>350.33</u>
				0 vehicles in line 11,			the <i>Public</i>	\$ 0.00

- Transportation expense allowance regardless of whether you use public transportation.
- 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for Public Transportation.

# Case 2:15-bk-53230 Doc 1 Filed 05/15/15 Entered 05/15/15 17:38:46 Desc Main Document Page 19 of 75

Debtor 1 Charles Robert Davis
First Name Middle Name Last Name

Case number (if known)

Case number (if known)

	her Necessary penses	In addition to the exper following IRS categorie	deductions listed above, y	ou are allowed your monthly expenses for the	
16.	employment taxes, soci your pay for these taxes	al security taxes, and M s. However, if you expec er from the total monthly	care taxes. You may inclu	local taxes, such as income taxes, self- de the monthly amount withheld from must divide the expected refund by 12 by for taxes.	\$ <u>1,325.51</u>
17.	union dues, and uniform	n costs.		requires, such as retirement contributions, 401(k) contributions or payroll savings.	\$ <u> </u>
18.	together, include payme	ents that you make for your strain on your strains on your str	spouse's term life insurar	if e insurance. If two married people are filing ce.  ng spouse's life insurance, or for any form of life	\$ <u>       0.00</u>
19.	agency, such as spousa	al or child support payme	S.	ed by the order of a court or administrative  b. You will list these obligations in line 35.	\$_2,387.21
20.	■ as a condition for you	ır job, or	for education that is either	r required: cation is available for similar services.	\$0.00
21.		, , ,	for childcare, such as bab condary school education.	ysitting, daycare, nursery, and preschool.	\$ <b>0.00</b>
22.	required for the health a savings account. Includ	and welfare of you or you e only the amount that is			\$ <b>0.00</b>
23.	you and your dependent service, to the extent not is not reimbursed by you Do not include payment	ts, such as pagers, call ecessary for your health ur employer. s for basic home teleph	ting, caller identification, so d welfare or that of your de	nat you pay for telecommunication services for pecial long distance, or business cell phone ependents or for the production of income, if it rvice. Do not include self-employment ou previously deducted.	+ \$0.00
24.	Add all of the expense Add lines 6 through 23.	es allowed under the IF	expense allowances.		\$ <u>9,979.05</u>
	ditional Expense ductions		deductions allowed by the any expense allowances I		
25.				enses. The monthly expenses for health ably necessary for yourself, your spouse, or your	
	Health insurance		\$ <u>243.75</u>		
	Disability insurance		\$39.91		
	Health savings acco	punt	\$0.00		
	Total		\$ 283.66 Copy to 1	al here →	\$_283.66
	Do you actually spe	nd this total amount?			
	No. How much do y	ou actually spend?	0.00		
26.	continue to pay for the r	easonable and necessa		The actual monthly expenses that you will erly, chronically ill, or disabled member of your nexpenses.	\$ <u>0.00</u>
27.				penses that you incur to maintain the safety of or other federal laws that apply.	\$ <u>0.00</u>
	By law, the court must I	eep the nature of these	penses confidential.		

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		Document	1 age 20 01 73
Debtor 1	Charles Robert Davis		Case number (if known)
	First Name Middle Name	1 ( )	

	dditional home energy costs. Your h	nome energy costs are included in yo	ur non-mortgage	housing and utilities	s allowance		
	you believe that you have home energousing and utilities allowance, then fill			duded in the non-mo	ortgage	\$ <u>0.00</u>	
	ou must give your case trustee docum laimed is reasonable and necessary.	entation of your actual expenses, and	d you must show	that the additional a	imount		
р	ducation expenses for dependent c er child) that you pay for your depende lementary or secondary school.					\$ <u>0.00</u>	
	ou must give your case trustee docum easonable and necessary and not alrea		d you must expla	in why the amount o	laimed is		
*	Subject to adjustment on 4/01/16, and	d every 3 years after that for cases be	egun on or after t	he date of adjustme	ent.		
tl	additional food and clothing expense nan the combined food and clothing allow and clothing allowances in the IRS	owances in the IRS National Standar				\$ <u>       0.00</u>	
	o find a chart showing the maximum a nstructions for this form. This chart may			in the separate			
Υ	You must show that the additional amount claimed is reasonable and necessary.						
31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)3 and (4).						+0.00	
Do not include any amount more than 15% of your gross monthly income.							
32. Add all of the additional expense deductions.							
P	Add lines 25 through 31.						
Ded	uctions for Debt Payment						
	or debts that are secured by an inte		uding home mo	rtgages,			
	o calculate the total average monthly pecured creditor in the 60 months after			each			
				Average monthly payment			
	Mortgages on your home						
	33a. Copy line 9b here			\$0.00			
	Loans on your first two vehicles						
	33b. Copy line 13b here			\$ <u>566.67</u>			
	33c. Copy line 13e here		<b>-</b>	\$166.67			
	Name of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?				
	33d. GM Financial	Automobile (2)	MNo □Yes	\$166.67			
	33e. Telhio Credit Union	Automobile (1)	<b>⊻</b> No □Yes	\$566.67			
	33f. Vanderbilt Mortgage & Finance	2014 Manufactured Home	<b>⊻</b> No □Yes	+ \$500.00			
	33g. Total average monthly paymen	t. Add lines 33a through 33f		\$ <u>1,233.34</u>	Copy total	\$ <u>1,233.34</u>	
			1		l .		

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Case number (if known)

_		
De	btor	1

Charles Robert Davis
First Name Middle Nam e

Last Name

34.		debts that you listed in line 3 opport or the support of your c		ry residence, a v	ehicle, or c	other property necess	ary for	
	Tyes.	Go to line 35. State any amount that you musyour property (called the cure a					ssion of	
		Name of the creditor	Identify property that secures the debt	Total cure amount		Monthly cure amount		
				\$	÷60 =	\$		
				\$	÷60 =	\$		
				\$	÷60 =	+ \$	Сору	
					Total	\$0.00	total here	\$ <u>0.00</u>
35.		owe any priority claims—such te of your bankruptcy case?		upport, or alimo	ny— that a	re past due as of the		
	<b>▼</b> No	Go to line 36.						
	☐ Yes.	Fill in the total amount of all of priority claims, such as those y		ot include current o	or ongoing			
		Total amount of all past-due p	riority claims			\$0.00	÷60	\$0.00
		d monthly Chapter 13 plan p				\$		
	of the Uni	nultiplier for your district as stat ited States Courts (for districts e Office for United States Trust	in Alabama and North Care			v		
	To find a in the sep clerk's off	list of district multipliers that incoarate instructions for this form. fice.	cludes your district, go onlir This list may also be avail	ne using the links able at the bankru	pecified	x	_	
						\$	Copy total	¢
	Average	monthly administrative expense	)			Ψ	here→	Ψ
37.	Add all o	f the deductions for debt pay	ment. Add lines 33g throu	gh 36.				\$ <u>1,233.34</u>
То	tal Deduc	ctions from Income						
38.	Add all o	f the allowed deductions.						
	Copy line	24, All of the expenses allowe	d under IRS expense allow	ances		\$ <u>9,979.05</u>		
	Copy line	32, All of the additional expens	se deductions			\$ <b>283.66</b>		
	Copy line	37, All of the deductions for de	ebt pay ment			+\$ 1,233.34		
	Total ded	uctions				\$ <u>11,496.05</u>	Copy total here	\$_11,496.05

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	Charles Ro	bert Davis Middle Nam e Last Nam	ie .		Case number	er (if known)		
Part 2: Dete	ermine Yo	ur Disposable Incom	e Under 11 U.S.C	C. § 1325(b)(2)				
9. Copy your t	otal current	monthly income from li ent Monthly Income and	ne 14 of Form 22C I Calculation of Co	-1, Chapter 13 mmitment Peri od	l			\$_9,625.20 
D. <b>Fill in any re</b> The monthly payments for	eas onably n average of a r a depender with applicab	ecessary income you re any child support payment at child, reported in Part I ale nonbankruptcy law to t	ceive for support f ts, foster care paym of Form 22C-1, that	or dependent chi ents, or disability you received in	ildren. \$			
em ployer wit	hheld from v § 541(b)(7)	ment deductions. The mages as contributions for plus all required repayment 362(b)(19).	qualified retirement	plans, as specifie	d \$	S0.	<u>00</u>	
2. Total of all o	leductions	all owed under 11 U.S.C.	§ 707(b)(2)(A). Cop	by line 38 here	<b>&gt;</b> (	11,496.	<u>05</u>	
and you have expenses. Y	e no reasona ou must give	ircumstances. If special able alternative, describe to your case trustee a detail mentation for the expense	he special circums t led explanation of t	ances and their	ses			
	e special circ			ount of expense				
43a				5				
43b			9	S				
43c			+	S				
43d. <b>Total</b> . A	Add lines 43	a through 43c		^ ^^	Copy 43d here 🔷 🛨 🛨	5	0.00	
<sup>1.</sup> Total adjust	<b>ments.</b> Add	lines 40 and 43d				11,496	Copy total here	<b>-</b> \$ <sub>11,496.05</sub>
5. Calculate yo	ur monthly	disposable income und	er § 1325(b)(2). Su	otract line 44 from	line 39.			\$ <u>-1,870.85</u>
Part 3:	Change in	Income or Expenses						
have chang the time yo after you fil	jed or are vii ur cas e will l ed your petit	expenses. If the income intually certain to change a pe open, fill in the information, check 22C-1 in the fill in when the increase occ	fter the date you file tion below. For exar st column, enter line	d your bankruptcy nple, if the wages e 2 in the second o	petition and reported incrolumn, expla	during eæsed		
Form	Line	Reason for change		Date of change	Increas decreas		ount of change	
22C <b>-1</b>					☐ Incre	JD .		
22C <b>-1</b>					☐ Incre	Ψ		
□ 22C <b>-1</b>					□Incre			
22C=1 22C=2					Decre	J)		
□ <sub>22C</sub> −1					Incre			
☐ 22C <b>-</b> 2					Decre	ease		

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Debtor 1	Charles Robert Davis First Name Middle Name	Last Name	Case number (if known)
Part 4:	Sign Below		

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct. /s/ Charles Robert Davis /s/ Taylor Lindsey Davis Signature of Debtor 1 Signature of Debtor 2 Date May 15, 2015 MM / DD / YYYY Date May 15, 2015 MM / DD / YYYY

 $\begin{array}{c} Case~2:15\text{-}bk\text{-}53230~Doc~1\\ B6~Summary~(Official~Form~6\text{-}Summary)~(12/14) \end{array}$ 

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**United States Bankruptcy Court Southern District of Ohio** 

IN RE:	Case No
Davis, Charles Robert & Davis, Taylor Lindsey	Chapter 13
Debtor(s)	

#### SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 0.00		
B - Personal Property	Yes	3	\$ 286,547.70		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	2		\$ 74,000.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	14		\$ 41,247.70	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			\$ 5,628.82
J - Current Expenditures of Individual Debtor(s)	Yes	4			\$ 4,593.82
	TOTAL	31	\$ 286,547.70	\$ 115,247.70	

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# United States Bankruptcy Court Southern District of Ohio

IN RE:	Case No.
Davis, Charles Robert & Davis, Taylor Lindsey	Chapter 13
Debtor(s)	

#### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in  $\S 101(8)$  of the Bankruptcy Code (11 U.S.C.  $\S 101(8)$ ), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

#### **State the following:**

Average Income (from Schedule I, Line 12)	\$ 5,628.82
Average Expenses (from Schedule J, Line 22)	\$ 4,593.82
Current Monthly Income (from Form 22A-1 Line 11; <b>OR</b> , Form 22B Line 14; <b>OR</b> , Form 22C-1	
Line 14)	\$ 9,625.20

#### State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 41,247.70
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 41,247.70

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IN RE Davis, Charles Robert & Davis, Taylor Lindsey

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sey Case No.

or(s) (If known)

Desc Main

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
None				

0.00 (Report also on Summary of Schedules)

**TOTAL** 

 $\begin{array}{c} \text{Case 2:15-bk-53230} \\ \text{B6B (Official Form 6B) } \text{ } \text{(12/07)} \end{array}$ Doc 1

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Case No.

IN RE Davis, Charles Robert & Davis, Taylor Lindsey

Debtor(s)

(If known)

#### **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1.	Cash on hand.		Cash on hand	J	5.00
2.	Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking account through Chase Bank Savings account through Chase Bank	H	30.00 25.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, include audio, video, and computer equipment.		Household goods and furnishings	J	1,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6.	Wearing apparel.		Wearing apparel	J	500.00
7.	Furs and jewelry.		Misc. jewelry	J	100.00
8.	Firearms and sports, photographic, and other hobby equipment.		(1) one .45 Smith & Wesson Semi-automatic handgun	Н	200.00
9.	Interest in insurance policies. Name insurance company of each policy and		Term life insurance policy through employer no cash surrender value beneficiary is debtor's spouse	Н	0.00
	itemize surrender or refund value of each.		Term life insurance policy through employer no cash surrender value beneficiary is debtor's spouse	w	0.00
10.	Annuities. Itemize and name each issue.	Х			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		OPERS through employer OPERS through employer	W W	193,421.53 2,246.17
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	Х			
14.	Interests in partnerships or joint ventures. Itemize.	X			

 $\underset{B6B \; (Official \; Form \; 6B)}{Case} \; 2:15\text{-}bk\text{-}53230$ 

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IN RE Davis, Charles Robert & Davis, Taylor Lindsey

\_ Case No. \_

Debtor(s)

(If known)

#### SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
15.	Government and corporate bonds and other negotiable and non-negotiable instruments.	Х			
16.	Accounts receivable.	X			
	Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		2013 Hyundai Accent Acquired on 8/28/2012 2014 Chevrolet Equinox Acquired on 09/03/2014 2014 CMH Foreman Manufactured HomeAcquired on 5/28/2014 Intent to surrender	J H M	10,000.00 34,000.00 45,000.00
26.	Boats, motors, and accessories.	х			
	Aircraft and accessories.	х			
	Office equipment, furnishings, and supplies.	Х			
29.	Machinery, fixtures, equipment, and supplies used in business.	Х			
30.	Inventory.	X			

Document

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IN RE Davis, Charles Robert & Davis, Taylor Lindsey

Case No.

Debtor(s)

(If known)

#### **SCHEDULE B - PERSONAL PROPERTY** (Continuation Sheet)

I THE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY  2 (two) cats	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
particulars.  33. Farming equipment and implements.  34. Farm supplies, chemicals, and feed.	x x x x			
		TO		286,547.70

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IN RE Davis, Charles Robert & Davis, Taylor Lindsey

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#### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under:

Check if debtor claims a homestead exemption that exceeds \$155,675. \*

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

		EXEMPTIONS
R.C. § 2329.66(A)(3)	5.00	5.00
R.C. § 2329.66(A)(3)	30.00	30.00
R.C. § 2329.66(A)(3)	25.00	25.00
R.C. § 2329.66(A)(4)(a)	1,000.00	1,000.00
R.C. § 2329.66(A)(4)(a)	500.00	500.00
R.C. § 2329.66(A)(4)(b)	100.00	100.00
R.C. § 2329.66(A)(18)	200.00	200.00
R.C. § 2329.66(A)(10)(a)	193,421.53	193,421.53
R.C. § 2329.66(A)(10)(a)	2,246.17	2,246.17
R.C. § 2329.66(A)(2)	3,675.00	10,000.00
R.C. § 2329.66(A)(2)	3,675.00	34,000.00
R.C. § 2329.66(A)(18)	20.00	20.00
	R.C. § 2329.66(A)(3) R.C. § 2329.66(A)(3) R.C. § 2329.66(A)(4)(a) R.C. § 2329.66(A)(4)(a) R.C. § 2329.66(A)(4)(b) R.C. § 2329.66(A)(18) R.C. § 2329.66(A)(10)(a) R.C. § 2329.66(A)(10)(a) R.C. § 2329.66(A)(2) R.C. § 2329.66(A)(2)	R.C. § 2329.66(A)(3) 30.00 R.C. § 2329.66(A)(3) 25.00 R.C. § 2329.66(A)(4)(a) 1,000.00 R.C. § 2329.66(A)(4)(a) 500.00 R.C. § 2329.66(A)(4)(b) 100.00 R.C. § 2329.66(A)(18) 200.00 R.C. § 2329.66(A)(10)(a) 193,421.53 R.C. § 2329.66(A)(10)(a) 2,246.17 R.C. § 2329.66(A)(2) 3,675.00 R.C. § 2329.66(A)(2) 3,675.00

<sup>\*</sup> Amount subject to adjustment on 4/1/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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Case No. (If known)

Summary of Certain Liabilities and Related

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.		J	Vehicle loan on 2013 Hyundai Accent				10,000.00	
GM Financial PO Box 183834 Arlington, TX 76096			Acquired on 8/28/2012					
	ĺ		VALUE \$ 10,000.00					
ACCOUNT NO.  GM Financial PO Box 78143 Phoenix, AZ 85062-8143			Assignee or other notification for: GM Financial					
			VALUE \$					
ACCOUNT NO.  GM Financial PO Box 99605 Arlington, TX 76096			Assignee or other notification for: GM Financial					
			VALUE \$					
ACCOUNT NO. Telhio Credit Union 96 North Fouth Street Columbus, OH 43215		J	Vehicle Ioan on 2014 Chevrolet Equinox Acquired on 09/03/2014				34,000.00	
			VALUE \$ <b>34,000.00</b>					
1 continuation sheets attached			(Total of the		otota		\$ 44,000.00	\$
			(Use only on le		Tota		\$ (Report also on Summary of Schedules )	\$ (If applicable, report also on Statistical Summary of Certain

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Debtor(s)

Case No. (If known)

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.			Assignee or other notification for:					
Telhio Credit Union 201 Outerbelt Street Columbus, OH 43213			Telhio Credit Union					
			VALUE \$					
ACCOUNT NO.			Assignee or other notification for:					
Telhio Credit Union PO Box 790408 St Louis, MO 63179			Telhio Credit Union					
			VALUE \$					
ACCOUNT NO.		J	Vehicle loan on 2014 CMH Foreman				30,000.00	
Vanderbilt Mortgage & Finance PO Box 4007 Maryville, TN 37802			Manufactured Home Acquired on 5/28/2014 Intent to surrender					
			VALUE \$ 40,000.00					
ACCOUNT NO.			Assignee or other notification for:					
Vanderbilt Mortgage & Finance P.O. Box 9800 Maryville, TN 37802			Vanderbilt Mortgage & Finance					
			VALUE \$					
ACCOUNT NO.			Assignee or other notification for:					
Vanderbilt Mortgage & Finance PO Box 742533 Cincinnati, OH 45274-2533			Vanderbilt Mortgage & Finance					
			VALUE \$					
ACCOUNT NO.			Assignee or other notification for:					
Vanderbilt Mortgage & Finance PO Box 9800 Maryville, TN 37802			Vanderbilt Mortgage & Finance					
			VALUE \$					
Sheet no. 1 of 1 continuation sheets atta Schedule of Creditors Holding Secured Claims	ached	to	(Total of		oago	e)	\$ 30,000.00	\$
			(Harankara	14-	Γot	al	\$ 74 000 00	6

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

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IN RE Davis, Charles Robert & Davis, Taylor Lindsey

Debtor(s)

Case No. (If known)

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority

	on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on Statistical Summary of Certain Liabilities and Related Data.
	Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TY	PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
	<b>Domestic Support Obligations</b> Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
	Extensions of credit in an involuntary case  Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
	Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
	Contributions to employee benefit plans  Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
	Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
	<b>Deposits by individuals</b> Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
	Taxes and Certain Other Debts Owed to Governmental Units  Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
	Commitments to Maintain the Capital of an Insured Depository Institution  Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol,

\* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

1 continuation sheets attached

a drug, or another substance. 11 U.S.C. § 507(a)(10).

Claims for Death or Personal Injury While Debtor Was Intoxicated

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#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

#### **Domestic Support Obligations**

(Type of Priority for Claims Listed on This Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO.		J	domestic support obligation						
Heather Davis 2671 Greenspire Way Grove City, OH 43123							unknown		
ACCOUNT NO.			Assignee or other notification						
Franklin County Child Support Agency Rep For Heather Davis 80 East Fulton Street Columbus, OH 43215			for: Heather Davis						
ACCOUNT NO.		J	domestic support obligation						
Jennifer Goodwin 7045 Sherbrook Drive Westerville, OH 43082							unknown		
ACCOUNT NO.			Assignee or other notification						
Franklin County Child Support Agency Rep For Jennifer Goodwin 80 East Fulton Street Columbus, OH 43215			for: Jennifer Goodwin						
ACCOUNT NO.									
ACCOUNT NO.									
Sheet no1 of1 continuation sheets	att	ched	to	Sub				Φ.	Φ.
Schedule of Creditors Holding Unsecured Priority  (Use only on last page of the comp			(Totals of the nedule E. Report also on the Summary of Sch	7	Γota	al	\$	\$	\$
			last page of the completed Schedule E. If apparal Summary of Certain Liabilities and Relater	olica		е,		\$	\$

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IN RE Davis, Charles Robert & Davis, Taylor Lindsey

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#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

	_						
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.		J	misc debt		П	П	
Avant Credit Corp. 640 N Lasalle Street Chicago, IL 60654							6,501.00
ACCOUNT NO.		J	misc debt		П	П	·
Barclay Card Services PO Box13337 Philadelphia, PA 19101							1,322.00
ACCOUNT NO.			Assignee or other notification for:		П	П	.,000
Barclay Card Services 700 Prides Xing Newark, DE 19713	-		Barclay Card Services				
ACCOUNT NO.		J	msic debt		П	П	
Capital One Bank PO Box 85520 Richmond, VA 23285							848.89
13 continuation sheets attached					tota		\$ 8,671.89
continuation sheets attached			(Total of the		age Fota	t	φ 0,071.09
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules and, if applicable, on the St Summary of Certain Liabilities and Related	atis	tica	al	\$

IN RE Davis, Charles Robert & Davis, Taylor Lindsey

Debtor(s)

Case No.

(If known)

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.  Capital One			Assignee or other notification for: Capital One Bank				
PO Box 30281 Salt Lake City, UT 84130							
ACCOUNT NO.			Assignee or other notification for:		H		
Capital One Bank 15000 Capital One Drive Richmond, VA 23238			Capital One Bank				
ACCOUNT NO.		J	misc debt				
Care Credit PO Box 965036 Orlando, TX 32896-5036							1,053.00
ACCOUNT NO.			Assignee or other notification for:				1,033.00
Care Credit/GEMB C/O Cardholder Operations PO Box 981439 El Paso, TX 79998-1439			Care Credit				
ACCOUNT NO.		J	notice of bk filing				
Chase/Best Buy PO Box 15298 Wilmington, DE 19850							
ACCOUNT NO.			Assignee or other notification for:		Н		unknown
Best Buy PO Box 688911 Des Moines, IA 50368			Chase/Best Buy				
ACCOUNT NO.			Assignee or other notification for:				
Best Buy HSBC Retail Services PO Box 5238 Carol Stream, IL 60197-5238			Chase/Best Buy				
Sheet no1 of13 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of th	Sub is p			\$ 1,053.00
-			(Use only on last page of the completed Schedule F. Report	7	Γota	al	

the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) \$

(If known)

IN RE Davis, Charles Robert & Davis, Taylor Lindsey

Debtor(s)

Case No.

Summary of Certain Liabilities and Related Data.) \$

		(	Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			Assignee or other notification for:		П		
Best Buy 50 Northwest Point Road Elk Grove Village, IL 60007			Chase/Best Buy				
ACCOUNT NO.		J	notice of BK filing				
Check N Go 2918 East Main Street Columbus, OH 43209							unknown
ACCOUNT NO.  Check N Go 100 Commercial Drive Fairfield, OH 45014			Assignee or other notification for: Check N Go				unknown
ACCOUNT NO.		J	misc debt		H		
Comenity Bank/Buckle PO Box 182789 Columbus, OH 43218							00.00
ACCOUNT NO.			Assignee or other notification for:		H		93.00
Comenity Bank Bankruptcy Dept. PO Box 182125 Columbus, OH 43218-2125			Comenity Bank/Buckle				
ACCOUNT NO.	H	J	notice of bk filing		H		
Comity Bank/VictoriasSecret PO Box 182789 Columbus, OH 43218							
ACCOUNT NO.			Assignee or other notification for:				unknown
Comenity Bank Bankruptcy Dept. PO Box 182125 Columbus, OH 43218-2125			Comity Bank/VictoriasSecret				
Sheet no. 2 of 13 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	-	age	e)	\$ 93.00
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relate	t als tatis	tica	n al	\$

(If known)

IN RE Davis, Charles Robert & Davis, Taylor Lindsey

Debtor(s)

Case No.

			Continuation Sneet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			Assignee or other notification for:			П	
Victoria's Secret PO Box 182118 Columbus, OH 43218	-		Comity Bank/VictoriasSecret				
ACCOUNT NO.		J	misc debt				
Credit One Bank P O Box 98873 Las Vegas, NV 89193-8673							356.00
ACCOUNT NO.			Assignee or other notification for:			Н	
Credit One Bank PO Box 60500 City Of Industry, CA 91716-0500			Credit One Bank				
ACCOUNT NO.		J	notice of bk filing				
Exeter Finance Corporation PO Box 390477 Minneapolis, MN 55439							
ACCOUNT NO.			Assignee or other notification for:			Н	unknown
Exeter Finance Corporation PO Box 166098 Irving, TX 75016			Exeter Finance Corporation				
A COOLINE NO	_		Assignee or other notification for:			H	
Exeter Finance Corporation PO Box 166097 Irving, TX 75016	_		Exeter Finance Corporation				
ACCOUNT NO.	$\vdash$	J	notice of bk filing	H		H	
Exxon Mobil Processing Center Po Box 6404 Sioux Falls, SD 57117							
Sheet no <b>3</b> of <b>13</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	_	<u> </u>	(Total of th	Sub			unknown \$ 356.00
Schedule of Cleanors Holding Offsecured Poliphority Claims			(Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Relate	als atis	Tota o o tica	al n al	\$

IN RE Davis, Charles Robert & Davis, Taylor Lindsey

Debtor(s)

Case No.

(If known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	DATED	TED	AMOUNT
		ı		CONTI	UNLIQUIDATED	DISPUTED	AMOUNI OF CLAIM
ACCOUNT NO.			Assignee or other notification for:				
Exxonmobil/Citibank PO Box 6497 Sioux Falls, SD 57117			Exxon Mobil				
ACCOUNT NO.		J	misc. debt				
Federal Loan Servicing PO Box 69184 Harrisburg, PA 17106-9184							3,851.00
ACCOUNT NO. Federal Loan Servicing PO Box 60610 Harrisburg, PA 17106			Assignee or other notification for: Federal Loan Servicing				
ACCOUNT NO.		J	misc debt				
Fingerhut 6250 Rdgewood Road Saint Cloud, MN 56303-0830							784.00
ACCOUNT NO.			Assignee or other notification for:				104.00
Webbank 9690 Deerco Ridgewood Drive Menomonee Falls, WI 53051			Fingerhut				
ACCOUNT NO.	H		Assignee or other notification for:				
Fingerhut 11 McLeland Road St. Cloud, MN 56395			Fingerhut				
ACCOUNT NO.		J	misc debt	-		H	
Ge Capital Retail Bank Attn: Bankruptcy Department PO Box 103106 Roswell, GA 30075							1,757.62
Sheet no. 4 of 13 continuation sheets attached to	1			Sub			
Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t  (Use only on last page of the completed Schedule F. Repo the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relat	rt als Statis	Fota o o tica	al n al	\$ 6,392.62

Summary of Certain Liabilities and Related Data.) \$

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Case No.

Summary of Certain Liabilities and Related Data.) \$

IN RE Davis, Charles Robert & Davis, Taylor Lindsey

Debtor(s)

(If known)

		(	Continuation Sheet)					
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	
ACCOUNT NO.  GE Capital Retail Bank PO Box 960061 Orlando, FL 32896-0061			Assignee or other notification for: Ge Capital Retail Bank					
ACCOUNT NO.  NES Rep For GE Capital Retail Bank 29125 Solon Road Solon, OH 44139			Assignee or other notification for: Ge Capital Retail Bank					
ACCOUNT NO.  Hyundai Capital America POB 20835 Fountain Valley, CA 92728		J	notice of bk filing				unknov	
ACCOUNT NO.  JB Robinson 375 Ghent Rd Fairlawn, OH 44333		J	notice of bk filing					
ACCOUNT NO.  Kay Jewelers PO Box 740425 Cincinnati, OH 45274-0425		J	notice of bk filing				unknov	wn
ACCOUNT NO.  Kay Jewelers 375 Ghent Road Fairlawn, OH 44333-4601			Assignee or other notification for: Kay Jewelers				unknov	wn
ACCOUNT NO.  Kohls N 56 WI 7000 Ridgewood Dr Menomonee, WI 53051		J	misc debt				1 044	
Sheet no. 5 of 13 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of the (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St	als	age Fota	e) al on	1,944. \$ 1,944.	

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Case No.

IN RE Davis, Charles Robert & Davis, Taylor Lindsey

Debtor(s)

(If known)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			Assignee or other notification for:	H	+		
Kohls PO Box 31115 Milwaukee, WI 53201			Kohls				
ACCOUNT NO.			Assignee or other notification for:				
Kohls Payment Center PO Box 2983 Milwaukee, WI 53201			Kohls				
ACCOUNT NO.		J	notice of bk filing		_	_	
Macy's PO Box 17759 Clearwater, FL 37762							unknown
ACCOUNT NO.			Assignee or other notification for:		$\dashv$		ulikilowii
Macy's 7 West 7th Street Cincinnati, OH 45202	-		Macy's				
ACCOUNT NO.			Assignee or other notification for:		_		
Macy's PO Box 18303 Columbus, OH 43218			Macy's				
ACCOUNT NO.			Assignee or other notification for:			_	
Macy's PO Box 8218 Mason, OH 45040			Macy's				
ACCOUNT NO.		J	notice of BK filing				
Nathaniel Cook 1045 South Court Street, Apt. 6 Circleville, OH 43113							
Sheet no. 6 of 13 continuation sheets attached to				Sub	tota		unknown
Sheet no6 of13 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of th		age	)	\$
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Relate	also atis	tica	n al	\$

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(If known)

IN RE Davis, Charles Robert & Davis, Taylor Lindsey

Debtor(s)

Case No.

		(1	Conunuation Sneet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.		J	misc. debt				
Nicholas Square Apartments 522 Nicholas Dr Circleville, OH 43113	-						679.00
ACCOUNT NO.			Assignee or other notification for:				
Federal Adjustment Bureau Rep For Nicholas Square Apartments 4640 Executive Drive Columbus, OH 43220			Nicholas Square Apartments				
ACCOUNT NO.		J	misc debt				
Paypal Credit Services PO Box 1056658 Atlanta, GA 30348-5658							166.00
ACCOUNT NO.	$\vdash$		Assignee or other notification for:				100.00
Paypal Credit Services PO Box 960080 Orlando, FL 32896			Paypal Credit Services				
ACCOUNT NO.	$\vdash$	J	misc debt				
Pediatric Academic Assoc Dept. L 647 Columbus, OH 43260							
	-						280.19
ACCOUNT NO.  Pediatric Academic Association PO Box 182976 Columbus, OH 43218-2976			Assignee or other notification for: Pediatric Academic Assoc				
ACCOUNT NO.	H		Assignee or other notification for:			H	
CBCS Rep For Pediatric Academic Assoc. PO Box 163279 Columbus, OH 43216-3279			Pediatric Academic Assoc				
Sheet no. 7 of 13 continuation sheets attached to			I	Sub	tota	al	_
Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of the (Use only on last page of the completed Schedule F. Reporthe Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Related	T t als tatis	Fota o o stica	al on al	\$ 1,125.19 \$

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(If known)

IN RE Davis, Charles Robert & Davis, Taylor Lindsey

Debtor(s)

Case No.

		(1	Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.		J	misc debt				
Prosper Marketplace 101 Second Street - Suite 1500 San Francisco, CA 94105							7,813.00
ACCOUNT NO.	<u> </u>	J	misc debt				1,01010
Riverside Methodist /Ohiohealth PO Box 182141 Columbus, OH 43218-2141							84.00
ACCOUNT NO.	1		Assignee or other notification for:				04.00
Riverside Methodist Hospital PO Box 40019 Phoenix, AZ 85067-0019			Riverside Methodist /Ohiohealth				
ACCOUNT NO.	H		Assignee or other notification for:				
OhioHealth 5350 Frantz Road Dublin, OH 43016			Riverside Methodist /Ohiohealth				
ACCOUNT NO.	H	J	notice of bk filing				
Shell/Citibak CBNA PO Box 6497 Sioux Falls, SD 57117-6497							
		_		-			unknown
ACCOUNT NO.  SpringLeaf Financial 600 N Royal Avenue Evansville, IN 47715		J	misc. debt				
							3,183.00
ACCOUNT NO.  Springleaf Financial Services of Ohio 60 Consuers Center Dr Unit 60 Chillicothe, OH 45601			Assignee or other notification for: SpringLeaf Financial				
Sheet no. <u>8</u> of <u>13</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Sub his p			\$ 11,080.00
			(Use only on last page of the completed Schedule F. Reporthe Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relate	t als tatis	stic	n al	\$

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IN RE Davis, Charles Robert & Davis, Taylor Lindsey

Debtor(s)

Case No. (If known)

		(	Conunuation Sneet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
A CCOLINE NO		J	misc. debt				
ACCOUNT NO.  Sprint PO Box 4191 Carol Stream, IL 60197-4191			inist. dest				991.00
ACCOUNT NO.			Assignee or other notification for:				331.00
Sprint PO Box 88026 Chicago, IL 60680-1206			Sprint				
ACCOUNT NO.			Assignee or other notification for:				
Sprint PO Box 8077 London, KY 40742-8077			Sprint				
ACCOUNT NO.			Assignee or other notification for:				
Sprint PO Box 57547 Jacksonville, FL 32241			Sprint				
ACCOUNT NO.  West Asset Management Rep For Sprint 7171 Mercy Rd Omaha, NE 68106			Assignee or other notification for: Sprint				
A GGOVATE VO			Assignee or other notification for:				
ACCOUNT NO.  Sprint Nextel Attn. Bankruptcy Department P.O. Box 7949 Overland Park, KS 66207-0949			Sprint Sprint				
ACCOUNT NO.		J	notice of bk filing				
SYNCB/Amazon PO Box 965015 Orlando, FL 32896							
Sheet no. 9 of 13 continuation sheets attached to				Sub	tota	al	unknown
Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of the (Use only on last page of the completed Schedule F. Reporthe Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relate	nis p T t als tatis	age Fota o o tica	e) al on al	\$ <b>991.00</b>

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IN RE Davis, Charles Robert & Davis, Taylor Lindsey

Debtor(s)

Case No. (If known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		(	Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.  Amazon PO Box 965015 Orlando, FL 32896-5015			Assignee or other notification for: SYNCB/Amazon				
ACCOUNT NO.  Amazon PO Box 981083 El Paso, TX 79998-1083			Assignee or other notification for: SYNCB/Amazon				
ACCOUNT NO.  SYNCB/American Eagle PO Box 965005 Orlando, FL 32896		J	notice of bk filing				
ACCOUNT NO.  American Eagle Outfitters 77 Hot Metal Street Pittsburgh, PA 15203			Assignee or other notification for: SYNCB/American Eagle				unknown
ACCOUNT NO.  Syncb/Cplus World Market POB 965036 Orlando, FL 32896		J	notice of bk filing				
ACCOUNT NO.  Syncb/Dicks PO Box 965005 Orlando, FL 32896		J	notice of bk filing				unknown
ACCOUNT NO.  Syncb/Old Navy PO Box 965005 Orlando, FL 32896-5005		J	notice of bk filing				unknown
Sheet no10 of13 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	,	pag Tot	e) tal	\$

(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) \$

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(If known)

IN RE Davis, Charles Robert & Davis, Taylor Lindsey

Debtor(s)

Case No.

Summary of Certain Liabilities and Related Data.) \$

		_ ((	Continuation Sheet)		_	_	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			Assignee or other notification for:				
Old Navy Visa/GECRB PO Box 960017 Orlando, FL 32896			Syncb/Old Navy				
ACCOUNT NO.		J	notice of bk filing				
Syncb/Sams PO Box 965005 Orlando, FL 32896							
ACCOUNT NO.		J	misc. debt				unknown
Synchrony Bank Po Box 960061 Orlando, FL 32896-0061							4 750 00
ACCOUNT NO.			Assignee or other notification for:				1,758.00
Portfolio Recovery Rep For Synchrony Bank 120 Corporate Blvd - Suite 100 Norfolk, VA 23502			Synchrony Bank				
ACCOUNT NO.		J	notice of bk filing				
Synchrony Bank/JC Penney PO Box 965007 Orlando, FL 32896							
ACCOUNT NO.			Assignee or other notification for:	+			unknown
JCPenney 6501 Legacy Drive Plano, TX 75024			Synchrony Bank/JC Penney				
ACCOUNT NO.			Assignee or other notification for:				
JCPenney 100 Half Day Road Lincolnshire, IL 60069-1458			Synchrony Bank/JC Penney				l
Sheet no11 of13 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of		age	e)	\$ 1,758.00
			(Use only on last page of the completed Schedule F. Repo the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relat	rt als Statis	stic	n al	s

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(If known)

IN RE Davis, Charles Robert & Davis, Taylor Lindsey

Debtor(s)

Case No.

Summary of Certain Liabilities and Related Data.) \$

		(	Continuation Sheet)					
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPLIFED	DISFULED	AMOUNT OF CLAIM
ACCOUNT NO.		J	notice of bk filing		T			
TD Bank USA/Target Credit 3701 Wayzata Blvd Minneapolis, MN 55416			3					unka suun
ACCOUNT NO.	-		Assignee or other notification for:		-			unknown
Target National Bank P.O. Box 59317 Minneapolis, MN 55459-0317			TD Bank USA/Target Credit					
ACCOUNT NO. Target National Bank P.O. Box 660170			Assignee or other notification for: TD Bank USA/Target Credit					
ACCOUNT NO.  Target National Bank C/O Target Credit Services PO Box 673			Assignee or other notification for: TD Bank USA/Target Credit					
Minneapolis, MN 55440								
ACCOUNT NO.	T	J	notice of bk filing		T	T		
United Consumer Financial Services 865 Bassett Road Westlake, OH 44145-1142								unknown
ACCOUNT NO.	$\vdash$	J	misc. debt		L	$\dagger$		unknown
Verizon Wireless One Verizon Way Basking Ridge, NJ 07920								
ACCOUNT NO.			Assignee or other notification for:					1,302.00
Verizon Wireless 5000 Britton Parkway Hilliard, OH 43026			Verizon Wireless					
Sheet no. 12 of 13 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	<u>L</u>		(Total o		pag	ge)	\$	1,302.00
			(Use only on last page of the completed Schedule F. Rep the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Rel	ort al Stati	stic	on cal		

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IN RE Davis, Charles Robert & Davis, Taylor Lindsey

Debtor(s)

Case No. (If known)

		(1	Continuation Sneet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			Assignee or other notification for:	+	H		
Verizon Wireless 133 Calkins Road Rochester, NY 14623			Verizon Wireless				
ACCOUNT NO.			Assignee or other notification for:	+			
Verizon Wireless 262 South Third Street Columbus, OH 43215			Verizon Wireless				
ACCOUNT NO.			Assignee or other notification for:	+			
Pinnacle Credit Service Rep For Verizon Wireless PO Box 640 Hopkins, MN 55343-0640			Verizon Wireless				
ACCOUNT NO.	T	J	misc debt				
Walmart 702 SW 8th Street Bentonville, AR 72716							1,011.0
ACCOUNT NO.  Walmart PO Box 965024 Orlando, FL 32896			Assignee or other notification for: Walmart				1,011.0
ACCOUNT NO.		J	misc debt	+			
Wffnb/Preferred Customer PO Box 14517 Des Moines, IA 50306							5 470 0
ACCOUNT NO.			Assignee or other notification for:	+		H	5,470.0
World Financial Network Bank P.O. Box 182125 Columbus, OH 43218-2125			Wffnb/Preferred Customer				
Sheet no13 of13 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub this p			\$ 6,481.0
			(Use only on last page of the completed Schedule F. Repo the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relat	rt als Statis	stic	on al	\$ 41,247.7

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IN RE Davis, Charles Robert & Davis, Taylor Lindsey

ndsey Case No.

(If known)

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

✓ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

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Case No.

Debtor(s

(If known)

## **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

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Fill in this i	nformation to ide	entify your case:		
Debtor 1	Charles Robe First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing	Taylor Linds	Middle Name	Last Name	
United States  Case number (If known)	. ,	or the: Southern District of Ohio		Check if this is:  An amended filing  A supplement showing post-petition chapter 13 income as of the following date:
Official	Form 6l			MM / DD / YYYY
				, 22 ,
Sched	dule I: Y	our Income	9	12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment 1. Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. If you have more than one job, attach a separate page with **M** Employed **M** Employed **Employment status** information about additional ■ Not employed ■ Not employed employers. Include part-time, seasonal, or self-employed work. Deputy Sheriff **Civilian Service Coordinator** Occupation Occupation may Include student or homemaker, if it applies. Franklin County Sheriff's Office Franklin County Sheriff's Office Employer's name Employer's address 410 South High Street 410 South High Street Number Street Number Street Columbus, OH 43215-0000 Columbus, OH 43215-0000 State ZIP Code State ZIP Code City How long employed there? 15 years 8 months Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 6,772.13 2.853.07 3. Estimate and list monthly overtime pay. 0.00 0.00 2,853.07 4. Calculate gross income. Add line 2 + line 3. 6,772.13

Official Form 6l Schedule I: Your Income page 1

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Debtor 1

Charles Robert Davis
First Name Middle Name Last Name

Case number (if known)

Case number (if known)

		For	Debtor 1			ebtor 2 or ling spouse	
Copy line 4 here	<b>4</b> .	\$	6,772.13		\$	2,853.07	-
5. List all payroll deductions:							
5a. Tax, Medicare, and Social Security deductions	5a.	\$	990.69		\$	334.82	
5b. Mandatory contributions for retirement plans	5b.	\$	880.38		\$	285.31	
5c. Voluntary contributions for retirement plans	5c.	\$	0.00		\$	0.00	
5d. Required repayments of retirement fund loans	5d.	\$	0.00		\$	0.00	
5e. Insurance	5e.	\$	283.66		\$	0.00	
5f. Domestic support obligations	5f.	\$	1,221.52		\$	0.00	
		\$	0.00		\$	0.00	
5g. Union dues	5g.						
5h. Other deductions. Specify:	5h.	+\$_	0.00		+ \$	0.00	
6. Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$ .	6.	\$	3,376.25	i	\$	620.13	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,395.88		\$	2,232.94	
8. List all other income regularly received:							
8a. Net income from rental property and from operating a business, profession, or farm							
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00		\$	0.00	
8b. Interest and dividends	8b.	\$	0.00		\$	0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive		Ψ	0.00		<b>~</b>	0.00	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00		\$	0.00	
8d. Unemployment compensation	8d.	\$	0.00		\$	0.00	
8e. Social Security	8e.	\$	0.00		\$	0.00	
8f. Other government assistance that you regularly receive							
Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		\$	0.00		\$	0.00	
Specify:	8f.						
8g. Pension or retirement income	8g.	\$	0.00		\$	0.00	
8h. Other monthly income. Specify:	8h.	+\$_	0.00		+\$_	0.00	-
9. <b>Add all other income</b> . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	0.00		\$	0.00	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10.	\$	3,395.88	+	\$	2,232.94	= \$5,628.82
<ol> <li>State all other regular contributions to the expenses that you list in Scheol Include contributions from an unmarried partner, members of your household, you</li> </ol>			ents, your roo	mr	nates, ai	nd	
other friends or relatives.	nc+ -	لطمانوس	to n=	<b>.</b>	o lieta -!	in Coloradii I	
Do not include any amounts already included in lines 2-10 or amounts that are			e το pay expe	ise	SIISTEC		
Specify:					-		· + \$0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Schedules and Statistical Summary of C					-		<u> </u>
13. Do you expect an increase or decrease within the year after you file this	form?	<b>?</b>					Combined monthly income
▼ No.				_			
Yes. Explain:							

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Fill in this information to identify your case:		
Debtor 1 Charles Robert Davis	01 1 1 1 1 1	
First Name Middle Name Last Name	Check if this is:	
Debtor 2 Taylor Lindsey Davis (Spouse, if filing) First Name Middle Name Last Name	—— An amended fill	ing howing post-petition chapter 13
United States Bankruptcy Court for the: Southern District of Ohio		the following date:
Case number(If known)	MM / DD / YYYY	
(II KILOWI)		g for Debtor 2 because Debtor 2
Official Form 6J	maintains a sep	parate household
Schedule J: Your Expenses		12/13
Be as complete and accurate as possible. If two married people are filing to information. If more space is needed, attach another sheet to this form. Or (if known). Answer every question.		
Part 1: Describe Your Household		
1. Is this a joint case?		
No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?		
No Yes. Debtor 2 must file a separate Schedule J.		
2. Do you have dependents?		
De		De pendent's Does dependent live with you?
•	ee Schedule Attached	□ No □ Yes
names.		□ No
_		☐ Yes
_		□ No
		☐ Yes
_		No Yes
		□ No
		☐ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?		
Part 2: Estimate Your Ongoing Monthly Expenses		
Estimate your expenses as of your bankruptcy filing date unless you are u	using this form as a supplement in a	a Chapter 13 case to report
expenses as of a date after the bankruptcy is filed. If this is a supplementa applicable date.	al Schedule J, check the box at the t	op of the form and fill in the
Include expenses paid for with non-cash government assistance if you know the state of the state		Your expenses
such assistance and have included it on <i>Schedule I: Your Income</i> (Official  4. The rental or home ownership expenses for your residence. Include first		
any rent for the ground or lot.	4.	\$1,175.00
If not included in line 4:		
4a. Real estate taxes	4a.	\$
4b. Property, homeowner's, or renter's insurance	4b.	\$
4c. Home maintenance, repair, and upkeep expenses	4c.	\$
4d. Homeowner's association or condominium dues	4d.	\$

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Debtor 1

Charles Robert Davis
First Name Middle Name

Last Name

Case number (if known)\_

		Your ex	penses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6. Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	225.00
6b. Water, sewer, garbage collection	6b.	\$	95.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	155.82
6d. Other. Specify:	6d.	\$	0.00
7. Food and housekeeping supplies	7.	\$1	550.00
8. Childcare and children's education costs	8.	\$	0.00
9. Clothing, laundry, and dry cleaning	9.	\$	185.00
Personal care products and services	10.	\$	99.00
Medical and dental expenses	11.	\$	225.00
<ol> <li>Transportation. Include gas, maintenance, bus or train fare.</li> <li>Do not include car payments.</li> </ol>	12.	\$	498.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	96.00
4. Charitable contributions and religious donations	14.	\$	0.00
<ol> <li>Insurance.</li> <li>Do not include insurance deducted from your pay or included in lines 4 or 20.</li> </ol>			
15a. Life insurance	15a.	\$	0.00
15b. Health insurance	15b.	\$	0.00
15c. Vehicle insurance	15c.	\$	145.00
15d. Other insurance. Specify:	15d.	\$	0.00
6. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
7. Installment or lease payments:			
17a. Car payments for Vehicle 1	17a.	\$	0.00
17b. Car payments for Vehicle 2	17b.	\$	0.00
17c. Other. Specify:	17c.	\$	0.00
17 d. Other. Specify:	17d.	\$	0.00
<ol> <li>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).</li> </ol>	18.	\$	0.00
9. Other payments you make to support others who do not live with you.		\$	0.00
Specify:	19.		
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income	ne.		
20a. Mortgages on other property	20a.	\$	0.00
20b. Real estate taxes	20b.	\$	0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's association or condominium dues	20e.	\$	0.00

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Debtor 1	Charles Robert Davis First Name Middle Name Last Name Case number (#.	known)		
21. <b>Otl</b>	er. Specify: Extra Expenses For The Children	21.	+\$	145.00
22. <b>Yo</b> u	r monthly expenses. Add lines 4 through 21.		•	4.593.82
The	result is your monthly expenses.	22.	Ψ	4,333.02
23. <b>Calc</b>	ulate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,628.82
23b.	Copy your monthly expenses from line 22 above.	23b.	-\$	4,593.82
23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	1,035.00
For	ou expect an increase or decrease in your expenses within the year after you file this form? example, do you expect to finish paying for your car loan within the year or do you expect your gage payment to increase or decrease because of a modification to the terms of your mortgage?			
	None None			

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IN RE Davis, Charles Robert & Davis, Taylor Lindsey

\_\_\_\_\_ Case No. \_\_\_\_\_

Debtor(s)

# SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

**Continuation Sheet - Page 1 of 1** 

DEPENDENTS:	RELATIONSHIP	AGE	DOES DEPENDENT LIVE WITH YOU?
	Son	14	Yes
	Daughter	12	Yes
	Daughter	9	Yes
	Son	8	Yes
	Son	6	Yes
	Son	2	Yes

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IN RE Davis, Charles Robert & Davis, Taylor Lindsey

Debtor(s)

(If known)

Case No.

## DECLARATION CONCERNING DEBTOR'S SCHEDULES

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 33 sheets, and that they are

true and correct to the best of h	ny knowledge, information, and belief.	
Date: May 15, 2015	Signature: /s/ Charles Robert Davis	Debtoi
	Charles Robert Davis	Debtor
Date: May 15, 2015	Signature: /s/ Taylor Lindsey Davis	(Joint Debtor, if any)
	Taylor Lindsey Davis	[If joint case, both spouses must sign.]
DECLARATION AND	SIGNATURE OF NON-ATTORNEY BANKRUPTCY PE	ΓΙΤΙΟΝ PREPARER (See 11 U.S.C. § 110)
compensation and have provided that and 342 (b); and, (3) if rules or given	y that: (1) I am a bankruptcy petition preparer as defined in the debtor with a copy of this document and the notices and in uidelines have been promulgated pursuant to 11 U.S.C. § 11 we given the debtor notice of the maximum amount before pred by that section.	formation required under 11 U.S.C. §§ 110(b), 110(h), 0(h) setting a maximum fee for services chargeable by
Printed or Typed Name and Title, if any	v. of Bankruptcy Petition Preparer	Social Security No. (Required by 11 U.S.C. § 110.)
	r is not an individual, state the name, title (if any), addres.	
Address		
Signature of Bankruptcy Petition Prepa	rer	Date
Names and Social Security number is not an individual:	s of all other individuals who prepared or assisted in preparing	g this document, unless the bankruptcy petition preparer
If more than one person prepared	this document, attach additional signed sheets conforming to	o the appropriate Official Form for each person.
A bankruptcy petition preparer's fi imprisonment or both. 11 U.S.C.	ailure to comply with the provision of title 11 and the Federal \$ 110; 18 U.S.C. § 156.	al Rules of Bankruptcy Procedure may result in fines or
DECLARATION U	NDER PENALTY OF PERJURY ON BEHALF OF C	CORPORATION OR PARTNERSHIP
I, the	(the president or other off	icer or an authorized agent of the corporation or a
	med as debtor in this case, declare under penalty of pe sheets (total shown on summary page plus 1), and	
Date:	Signature:	
		(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Case 2:15-bk-53230 B7 (Official Form 7) (04/13)Doc 1 Filed 05/15/15 Entered 05/15/15 17:38:46 Desc Main Document Page 58 of 75 **United States Bankruptcy Court Southern District of Ohio** 

IN RE:	Case No.
Davis, Charles Robert & Davis, Taylor Lindsey	Chapter 13
Debtor(s)	•

## STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 -25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider," The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101(2),(31).

### 1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

0.00 Employment Income (joint):

YTD: \$40,448.60 2014: \$115,398.00 2013: \$97,281.00

## 2. Income other than from employment or operation of business

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### Case 2:15-bk-53230 Doc 1 Filed 05/15/15 Entered 05/15/15 17:38:46 Document Page 59 of 75

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,255.\* If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

## 5. Repossessions, foreclosures and returns

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

## 6. Assignments and receiverships

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 7. Gifts

None List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 8. Losses

None List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 9. Payments related to debt counseling or bankruptcy

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE Mark Albert Herder, LLC 1031 East Broad Street Columbus, OH 43205 **Academy Of Financial** 

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY 90.00

15 May 2015

14 May 2014 10.95

# 10. Other transfers

None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

#### 11. Closed financial accounts

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

## 12. Safe deposit boxes



None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 13. Setoffs





List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

## 14. Property held for another person

List all property owned by another person that the debtor holds or controls.



#### 15. Prior address of debtor

If debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

#### 16. Spouses and Former Spouses

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

#### 17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

 $\checkmark$ 

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: May 15, 2015	Signature /s/ Charles Robert Davis of Debtor	Charles Robert Davis
Date: <b>May 15, 2015</b>	Signature /s/ Taylor Lindsey Davis	
	of Joint Debtor (if any)	Taylor Lindsey Davis
	<b>0</b> continuation pages attached	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

Amazon PO Box 965015 Orlando, FL 32896-5015

Amazon PO Box 981083 El Paso, TX 79998-1083

American Eagle Outfitters 77 Hot Metal Street Pittsburgh, PA 15203

Avant Credit Corp. 640 N Lasalle Street Chicago, IL 60654

Barclay Card Services PO Box13337 Philadelphia, PA 19101

Barclay Card Services 700 Prides Xing Newark, DE 19713

Best Buy PO Box 688911 Des Moines, IA 50368

Best Buy HSBC Retail Services PO Box 5238 Carol Stream, IL 60197-5238

Best Buy 50 Northwest Point Road Elk Grove Village, IL 60007 Capital One PO Box 30281 Salt Lake City, UT 84130

Capital One Bank PO Box 85520 Richmond, VA 23285

Capital One Bank 15000 Capital One Drive Richmond, VA 23238

Care Credit PO Box 965036 Orlando, TX 32896-5036

Care Credit/GEMB C/O Cardholder Operations PO Box 981439 El Paso, TX 79998-1439

CBCS
Rep For Pediatric Academic Assoc.
PO Box 163279
Columbus, OH 43216-3279

Chase/Best Buy PO Box 15298 Wilmington, DE 19850

Check N Go 2918 East Main Street Columbus, OH 43209 Check N Go 100 Commercial Drive Fairfield, OH 45014

Comenity Bank
Bankruptcy Dept.
PO Box 182125
Columbus, OH 43218-2125

Comenity Bank/Buckle PO Box 182789 Columbus, OH 43218

Comity Bank/VictoriasSecret PO Box 182789 Columbus, OH 43218

Credit One Bank P O Box 98873 Las Vegas, NV 89193-8673

Credit One Bank PO Box 60500 City Of Industry, CA 91716-0500

Exeter Finance Corporation PO Box 390477 Minneapolis, MN 55439

Exeter Finance Corporation PO Box 166098 Irving, TX 75016

Exeter Finance Corporation PO Box 166097 Irving, TX 75016

Exxon Mobil Processing Center Po Box 6404 Sioux Falls, SD 57117

Exxonmobil/Citibank PO Box 6497 Sioux Falls, SD 57117

Federal Adjustment Bureau Rep For Nicholas Square Apartments 4640 Executive Drive Columbus, OH 43220

Federal Loan Servicing PO Box 60610 Harrisburg, PA 17106

Federal Loan Servicing PO Box 69184 Harrisburg, PA 17106-9184

Fingerhut 6250 Rdgewood Road Saint Cloud, MN 56303-0830

Fingerhut
11 McLeland Road
St. Cloud, MN 56395

Franklin County Child Support Agency Rep For Jennifer Goodwin 80 East Fulton Street Columbus, OH 43215 Franklin County Child Support Agency Rep For Heather Davis 80 East Fulton Street Columbus, OH 43215

GE Capital Retail Bank PO Box 960061 Orlando, FL 32896-0061

Ge Capital Retail Bank Attn: Bankruptcy Department PO Box 103106 Roswell, GA 30075

GM Financial PO Box 78143 Phoenix, AZ 85062-8143

GM Financial PO Box 99605 Arlington, TX 76096

GM Financial PO Box 183834 Arlington, TX 76096

Heather Davis 2671 Greenspire Way Grove City, OH 43123

Hyundai Capital America POB 20835 Fountain Valley, CA 92728 JB Robinson 375 Ghent Rd Fairlawn, OH 44333

JCPenney 6501 Legacy Drive Plano, TX 75024

JCPenney 100 Half Day Road Lincolnshire, IL 60069-1458

Jennifer Goodwin 7045 Sherbrook Drive Westerville, OH 43082

Kay Jewelers PO Box 740425 Cincinnati, OH 45274-0425

Kay Jewelers 375 Ghent Road Fairlawn, OH 44333-4601

Kohls N 56 WI 7000 Ridgewood Dr Menomonee, WI 53051

Kohls PO Box 31115 Milwaukee, WI 53201

Kohls Payment Center PO Box 2983 Milwaukee, WI 53201 Macy's PO Box 17759 Clearwater, FL 37762

Macy's 7 West 7th Street Cincinnati, OH 45202

Macy's PO Box 18303 Columbus, OH 43218

Macy's PO Box 8218 Mason, OH 45040

Nathaniel Cook 1045 South Court Street, Apt. 6 Circleville, OH 43113

NES
Rep For GE Capital Retail Bank
29125 Solon Road
Solon, OH 44139

Nicholas Square Apartments 522 Nicholas Dr Circleville, OH 43113

OhioHealth 5350 Frantz Road Dublin, OH 43016

Old Navy Visa/GECRB PO Box 960017 Orlando, FL 32896 Paypal Credit Services PO Box 960080 Orlando, FL 32896

Paypal Credit Services PO Box 1056658 Atlanta, GA 30348-5658

Pediatric Academic Assoc Dept. L 647 Columbus, OH 43260

Pediatric Academic Association PO Box 182976 Columbus, OH 43218-2976

Pinnacle Credit Service Rep For Verizon Wireless PO Box 640 Hopkins, MN 55343-0640

Portfolio Recovery Rep For Synchrony Bank 120 Corporate Blvd - Suite 100 Norfolk, VA 23502

Prosper Marketplace 101 Second Street - Suite 1500 San Francisco, CA 94105

Riverside Methodist /Ohiohealth PO Box 182141 Columbus, OH 43218-2141

Riverside Methodist Hospital PO Box 40019 Phoenix, AZ 85067-0019

Shell/Citibak CBNA PO Box 6497 Sioux Falls, SD 57117-6497

SpringLeaf Financial 600 N Royal Avenue Evansville, IN 47715

Springleaf Financial Services of Ohio 60 Consuers Center Dr Unit 60 Chillicothe, OH 45601

Sprint PO Box 4191 Carol Stream, IL 60197-4191

Sprint PO Box 88026 Chicago, IL 60680-1206

Sprint PO Box 8077 London, KY 40742-8077

Sprint PO Box 57547 Jacksonville, FL 32241

Sprint Nextel
Attn. Bankruptcy Department
P.O. Box 7949
Overland Park, KS 66207-0949

SYNCB/Amazon PO Box 965015 Orlando, FL 32896

SYNCB/American Eagle PO Box 965005 Orlando, FL 32896

Syncb/Cplus World Market POB 965036 Orlando, FL 32896

Syncb/Dicks PO Box 965005 Orlando, FL 32896

Syncb/Old Navy PO Box 965005 Orlando, FL 32896-5005

Syncb/Sams PO Box 965005 Orlando, FL 32896

Synchrony Bank Po Box 960061 Orlando, FL 32896-0061

Synchrony Bank/JC Penney PO Box 965007 Orlando, FL 32896

Target National Bank
P.O. Box 59317
Minneapolis, MN 55459-0317

Target National Bank P.O. Box 660170 Dallas, TX 75266-0170

Target National Bank C/O Target Credit Services PO Box 673 Minneapolis, MN 55440

TD Bank USA/Target Credit 3701 Wayzata Blvd Minneapolis, MN 55416

Telhio Credit Union 96 North Fouth Street Columbus, OH 43215

Telhio Credit Union 201 Outerbelt Street Columbus, OH 43213

Telhio Credit Union PO Box 790408 St Louis, MO 63179

United Consumer Financial Services 865 Bassett Road Westlake, OH 44145-1142

Vanderbilt Mortgage & Finance PO Box 4007 Maryville, TN 37802

Vanderbilt Mortgage & Finance P.O. Box 9800 Maryville, TN 37802

Vanderbilt Mortgage & Finance PO Box 742533 Cincinnati, OH 45274-2533

Vanderbilt Mortgage & Finance PO Box 9800 Maryville, TN 37802

Verizon Wireless 5000 Britton Parkway Hilliard, OH 43026

Verizon Wireless 133 Calkins Road Rochester, NY 14623

Verizon Wireless 262 South Third Street Columbus, OH 43215

Verizon Wireless One Verizon Way Basking Ridge, NJ 07920

Victoria's Secret PO Box 182118 Columbus, OH 43218

Walmart 702 SW 8th Street Bentonville, AR 72716

Walmart PO Box 965024 Orlando, FL 32896 Webbank 9690 Deerco Ridgewood Drive Menomonee Falls, WI 53051

West Asset Management Rep For Sprint 7171 Mercy Rd Omaha, NE 68106

Wffnb/Preferred Customer PO Box 14517 Des Moines, IA 50306

World Financial Network Bank P.O. Box 182125 Columbus, OH 43218-2125

## Case 2:15-bk-53230 Doc 1 Filed 05/15/15 Entered 05/15/15 17:38:46 Desc Main Document Page 75 of 75 **United States Bankruptcy Court Southern District of Ohio**

IN RE:	Case No	
Davis, Charles Robert & Davis, Taylor Lindsey	Chapter 13	
Debtor(s)		

## STATEMENT OF RELATED CASES INFORMATION REQUIRED BY LOCAL RULE 1015-2

Please check the appropriate box(es) with respect to each of the following items and state the required information in the space below, adding an additional page if necessary:

If any previous bankruptcy case of any kind was filed in any court within the last eight (8) years by or against this debtor or any entity related to the debtor as described below, or if the debtor or any entity related to the debtor as described below has the dge e

a pending bankruptcy case in any bankruptcy court regardless of when such case was filed, then set forth 1) the name of debtor, 2) case number, 3) date filed, 4) chapter filed under, 5) district and division where the case is or was pending, 6) current status of the case, 7) whether a discharge was granted, denied, or revoked, 8) any real estate in the case and 9) ju assigned to the case. If the prior case was a case under chapter 13 which was confirmed, paid out and discharged, and the current case is a chapter 7 case, the debtor shall disclose the percentage paid to unsecured creditors in the chapter 13 case.
This debtor (identical individual, including DBAs, FDBAs)  This debtor (identical business entity)  Spouse of this debtor  Former spouse of debtor  Corporation/LLC if this debtor is or was a major shareholder/member of the corporation/LLC  Major shareholder of this debtor (if this debtor is a corporation)  Affiliate(s) of this debtor (see § 101(2) of the Code)  Partnership, if this debtor is or was a general partner in the partnership  General partner of this debtor (if this debtor is a partnership)  General partner of this debtor (if this debtor is or was another general partner therewith)  Entity with which this debtor has substantial identity of financial interests or assets  Involuntary
X NONE OF THE ABOVE APPLY
I DECLARE, UNDER PENALTY OF PERJURY, THAT THE FOREGOING IS TRUE AND CORRECT.
Dated: May 15, 2015  /s/ Charles Robert Davis  DEBTOR /s/ Taylor Lindsey Davis JOINT DEBTOR